



## State of Kansas

# Direct Bill

Health Care Commission

1st Quarter, March 2006

State Health Plan Continuation Program

### Medicare Part D - Getting to Know You

By Connie Hafestine, Health Care Commissioner  
Retiree Representative

#### Inside this issue:

Medicare Part D - Getting to Know You	1 - 3
Privacy Notice	3
Making Medicare Make Sense Questions and Answers	4 - 5

Open Enrollment is over!! It is time to move on to other issues. BUT WAIT!!!! Many of you Medicare eligible participants made no change to your State of Kansas health insurance plan for 2006. I am hopeful that this was a conscious decision on your part. Hundreds of calls to the Direct Bill staff following the Open Enrollment period lead me to believe that many of you were caught in the chaos and confusion surrounding information on the Medicare Part D drug program.

As you are aware, information from Medicare and companies authorized to offer Part D coverage was delayed until late October. Many providers did not have information available until mid-November. As a result, the State of Kansas Direct Bill Open Enrollment period was delayed until November.

When information was provided, there were deadlines for both our Direct Bill enrollment changes and for the Medicare Part D plans. These deadlines were not the same and confusion reigned!

For those of you who diligently stayed on top of all of this information amid the confusion, I say, "Great Job!" For those who have yet to make a decision, you must continue to research, pursue answers to your questions about Part D and attempt to determine if it reduces your costs while providing you with adequate prescription drug coverage. For those of you who thought the decision to stay with the State of Kansas prescription drug program was the last time you would have to look at this information, think again! As prescription drug costs continue to

Continued on page 2

The Direct Bill News is an official publication from the Kansas State Employees Health Care Commission.

The newsletter is published quarterly. It is mailed to Direct Bill participants and is also published on-line at:

[http://da.state.ks.us/  
hcc/direct.htm](http://da.state.ks.us/hcc/direct.htm)

Copyright, all rights reserved.

Health Care  
Commission  
900 SW Jackson  
Suite 920  
Topeka, KS 66612

785-296-6280

Duane Goossen, Chair and Secretary of Administration; Sharon Bolyard, Classified Service; Connie Hafenstein, Retiree from Classified Service; Sandy Praeger, Commissioner of Insurance and John Staton, public representative.

## Medicare Part D - Getting to Know You (continued)

rise, so too will premiums. About 19% of our Medicare eligible members opted to join Medicare Part D while retaining their medical and dental coverage with the State. Decreasing the number of participants most likely will have some adverse impact upon the state Medicare eligible participant pool which may lead to further increased rates in the coming years. For this reason, it behooves you to look toward the Part D program to reduce your prescription drug costs.

Open Enrollment for State Retirees for Plan Year 2007 will be held during the month of November 2006. Medicare Part D Open Enrollment, for changes effective January 1, 2007, will be from November 15, 2006 through December 31, 2006. Please use the months between now and the first of November to research options. In Kansas, help is available from the Area Agencies on Aging through their Senior Health Insurance Counseling of Kansas (SHICK) staff. Their toll-free number is 1-800-860-5260. SHICK will refer you to one of their regional offices for one-on-one counseling. At the counseling session, they will

need a list of your current prescription drugs and dosage. SHICK will not select a plan for you, but will provide you comparisons so that you have sufficient information to make a decision.

For those of you who reside outside of Kansas, help is available to you in your state through agencies similar to those in Kansas. A complete listing for all states can be found at the website: [Eldercare.gov](http://Eldercare.gov) or by calling Eldercare Locator at 1-800-677-1116.

For those of you who are internet active, the [Medicare.gov](http://Medicare.gov) website provides an excellent comparison by clicking on "Find a Prescription Drug Plan" and scrolling to General Inquiry and inputting your prescription drugs. A listing will be provided of all the companies in your area that offer coverage for the prescription drugs you indicated. You can also add your pharmacy preference and only those companies which are contracted with your pharmacy will be listed. To further verify this information many of the Medicare Part D plans have websites that provide a com-

Continued on page 3

## Medicare Part D - Getting to Know You (continued)

plete drug formulary and in some cases, a cost savings analysis. all of us and you must continue to search for the best option for you.

The bottom line is that this issue is still at the forefront of concern for

++++++

## Where to Find the Health Insurance Portability and Accountability Act (HIPAA) Privacy Notice for The State of Kansas Group Health Plan

In 1996, congress passed the Health Insurance Portability Act, now more commonly known as HIPAA. HIPAA required the U.S. Department of Health and Human Services (DHHS) to adopt separate regulations covering standardized transactions, privacy of individually identifiable health information, security of individually identifiable health information and unique identifiers for individuals, health care plans, employers and health care providers.

The HIPAA Regulations require that health care plans send reminder notices to participants at least once every three years about the availability of the HIPAA Privacy Notice and how to obtain it. HIPAA Privacy pertains to the following group health plan benefits sponsored by the State of Kansas:

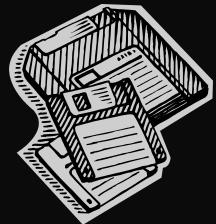
- Kansas Choice (PPO); Premier Blue (HMO); Senior Plan C.
- Coventry Health Care of Kansas (PPO and HMO); Advantra

Freedom.

- Preferred Plus of Kansas (HMO).
- Lab Card Plan (LabOne services for Kansas Choice and Coventry PPO participants).
- Delta Dental of Kansas, Inc.
- Caremark prescription drug services.
- Superior Vision Services.

To obtain a copy of the HIPAA Privacy Notice for the above noted group health plan benefits, write or call the HIPAA Privacy Official at the Division of Health Policy and Finance at:

**900 SW Jackson Street, Room 951S  
Landon State Office Building  
Topeka, KS 66612-1251  
(785) 296-4341 or visit our website at <http://da.state.ks.us/ps/subject/hipaa.htm>**



**CONEXIS  
remains the  
third party  
administrator  
that provides  
the billing  
service for all  
Direct Bill  
participants.  
CONEXIS toll  
free number is:  
1-866-214-2978**



www.medicare.gov • 1-800-MEDICARE (1-800-633-4227)

## MAKING MEDICARE MAKE SENSE

### *Answers To Some of The Most Commonly Asked Medicare Questions*

**Q:** I have heard that there have been some phone schemes that ask people with Medicare for money and checking account information to help them enroll in a Medicare Prescription Drug Plan; a scheme called the “\$299 Ring” the amount of money people are asked to withdraw. What should people lookout for so that they can get legitimate help with Medicare prescription drug enrollment?

**A:** Medicare has received some complaints from various states against a number of different companies, but authorities believe that the companies are the same and are typically based outside the U.S. The complaints are being investigated by federal law enforcement authorities.

The complaints are people with Medicare talked into withdrawing \$299 from their checking accounts to pay for a non-existent prescription drug plan. Consumers are urged to report these cases to their local law enforcement agencies or 1-877-7SAFERX (1-877-772-3379).

In order to stop this and other scams from happening, consumers need to know that:

- No Medicare drug plan can ask a person with Medicare for bank account or other personal information over the telephone. *Never provide that information to a caller. You should contact your local police department if you believe someone is trying to take money or information from you illegally.*
- No one can come into your home uninvited.
- No one can ask for personal information during their marketing activities.
- Always keep all personal information such as your Medicare number safe, just as you would a credit card or bank account number.
- And, whenever you have a question or concern about any activity regarding Medicare, call 1-800-Medicare.

In addition, legitimate Medicare drug plans will not ask for payment over the telephone or the Internet. They must bill the beneficiary for the monthly premium. Typically that amount is set up as an automatic withdrawal from the beneficiary's monthly Social Security check. Beneficiaries may also opt to pay the monthly premium in other ways such as writing a check or setting up automatic payments from their checking accounts.

## MAKING MEDICARE MAKE SENSE

### *Answers To Some of The Most Commonly Asked Medicare Questions (Continued)*

**Q:** What is the March 31 deadline for prescription drug plans paying for a transitional dosage of drugs for beneficiaries who need coverage for their current drugs that are not on the plans formulary?

**A:** Medicare and the drug plans are working together to make sure that beneficiaries have the coverage for the prescriptions they need. Most plans have a list of drugs covered by the plan called a formulary. Your plan may have a different brand-name drug for your condition on its list than the prescription you currently take. You can work with your doctor to change to this drug or a generic drug if one is on the list. If your doctor thinks you need a drug that isn't on the list, your doctor can apply for an exception for you to continue your current prescription. If the plan denies the request, you can appeal their decision.

In February, Medicare and the plans announced that they would provide beneficiaries with payment for their current prescription (in 30-day supplies) through March 31, 2006. This additional time was designed to give you more time to work with your doctor to find a drug that is on the plan's formulary that will work for your condition, or for your doctor to apply for an exception for you to continue your current prescription.

**Q:** What happens if a person with Medicare who qualifies for the low-income subsidy (help with out-of-pocket costs) has not yet enrolled in a prescription drug plan?

**A:** To give individuals who qualify for the low-income subsidy time to choose a plan that meets their needs, Medicare will wait until May 1<sup>st</sup> before they automatically enroll these individuals in a Medicare Prescription Drug Plan. This automatic enrollment will ensure that these individuals get the drug coverage they need. By mid April or sooner, the Centers for Medicare & Medicaid Services will notify those individuals, who qualify for the low-income subsidy, of the plan in which they will be automatically enrolled, if they do not choose a plan on their own. CMS will enroll them in that plan effective May 1, 2006. These beneficiaries will have one additional opportunity to change plans if the plan chosen for them is not appropriate for their prescription drug needs. *Please note that this facilitated enrollment will only happen for those who have qualified for the low-income subsidy and who have not chosen a plan.*

direct.htm  
da.state.ky.us/hcc/  
http://  
We're On the Web!

Keeping Direct Bill participants informed!

Permit 157  
PAID  
US Postage  
Standard  
Presorted

State of Kansas

Health Care Commission  
900 SW Jackson Street  
Room 951-S—Landau State Office Building  
Topeka, KS 66612-1251

